Now There's A Better Way To Pay.
If you have a home loan, fixed rate equity loan, equity line of credit or auto loan serviced by First Federal, Automatic Loan Payment is the easiest way to make sure your monthly payments are made on time every time. With Automatic Loan Payment your payments are made automatically each month without having to write and mail your check.

Setting Up Automatic Payments is Easy:

<table>
<thead>
<tr>
<th>Step 1:</th>
<th>Print, Complete and Sign the Authorization Form on the next page.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 2:</td>
<td>Drop off the form and voided check or ticket at any First Federal banking center location or mail to:</td>
</tr>
<tr>
<td></td>
<td>First Federal Bank of Kansas City</td>
</tr>
<tr>
<td></td>
<td>Attn: Loan Customer Support</td>
</tr>
<tr>
<td></td>
<td>P.O. Box 419194</td>
</tr>
<tr>
<td></td>
<td>Kansas City, MO 64141-6194</td>
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</tbody>
</table>
AUTOMATIC LOAN PAYMENT AUTHORIZATION FORM

Month to begin Automatic Transfer ____________________________________
(Please allow 3-4 weeks for set-up and activation.)

Date to draw payment: (circle one)
Home Loan    1st  5th  10th
*Auto Loan: circle due date  1st  5th  10th  15th  20th  25th
*Equity Loan: circle due date  1st  5th  10th  15th  20th  25th
*Equity Line of Credit            15th  20th  25th

*IMPORTANT NOTICE. First Federal will not draw final payment. A maturity notice will be mailed.

Regular payment amount** $______________
Additional monthly payment to principal (Optional – not required) $______________________

Transfer payment from checking or savings account #____________________________
Name of bank (bank name from which funds are to be drawn)__________________________________
Routing/ABA # of bank____________________________________________________
Address of bank__________________________________________________________
City_________________________ State_________________ Zip code _____________
Phone (_______) _________________________________________________________

Apply payment to loan # (your First Federal Bank loan number) ____________________________________________

I authorize First Federal Bank, FSB (First Federal) to transfer/debit funds, each month, in the amount specified on this
form, and apply the funds to the loan account also indicated on this form at First Federal. I acknowledge that the
origination of ACH transactions to my account must comply with the provisions of U.S. law.

I also agree to maintain an account with a sufficient balance to cover these monthly payments. As long as a sufficient
balance is maintained in the account to cover any payment authorized, I understand that I will not be in default of my loan
payment. I also agree to have sufficient funds in the account at First Federal or another financial institution, as specified,
at least FIVE (5) business days before the date the payment is transferred. I understand that if sufficient funds are not
available in the account at the specified time of transfer, non-sufficient funds service fees AND late charges, if applicable,
will be charged to my account. I also understand that, in the event that my loan is sold or transferred by First Federal,
this agreement will end with written notice from First Federal. This Authorization is to remain in effect until revoked in
writing 3 business days prior to the draw date by either party. Adjustments in the transfer amount may occur for
adjustable loans, or during escrow analysis.

I understand that if any automatic payment is dishonored, with or without cause, intentionally or inadvertently, First
Federal will be under no liability whatsoever.

Authorized by (please print your name here)__________________________________________________________________
Signature________________________________ Date____________________________

I acknowledge that I received a copy of this form.
Signature________________________________ Date___________________________

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To be completed by First Federal

- Final Disbursement date _________________________
- New Account
- Change only
Name of employee processing form________________________ Date________________________
Name of employee setting up ALP________________________ Date________________________

Original to Loan Servicing / Photocopy for Customer